



PTO/SB/22 (08-03)

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## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)

28341/6276NCP

In re Application of Gabriel Vogeli, et al.

Application Number  
09/698,419Filed  
October 27, 2000

For: G PROTEIN-COUPLED RECEPTORS EXPRESSED IN BRAIN

Art Unit 1646

Examiner J. Ulm

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))             | \$ |        |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ | 420.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))          | \$ |        |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))           | \$ |        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))           | \$ |        |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

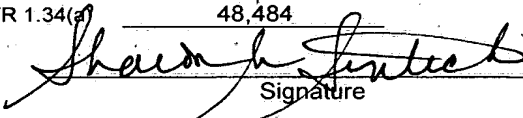
☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2855

I have enclosed a duplicate copy of this sheet.

- I am the
- ☐ applicant/inventor.
  - ☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
  - ☐ attorney or agent of record. Registration Number
  - ☒ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) 48,484

October 24, 2003  
Date

(312) 474-6631  
Telephone Number

  
Signature  
Sharon M. Sintich  
Typed or printed name

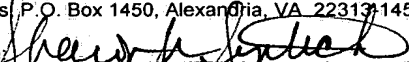
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☐ Total of 1 forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 24, 2003

Signature

 (Sharon M. Sintich)

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